

STATE FIRE MARSHAL
Department of Insurance
700 W. State Street, 3rd Floor
Boise, ID. 83720

2006 RENEWAL APPLICATION

Idaho State Certified Fire Inspector

Applicant Name Phone

Home Address City ST Zip County

E-mail address: Optional

Governmental entity to be served Phone

Address City ST Zip County

Endorsement by Government Unit Official:

Date Signature of Fire Chief, Sheriff, Fire District Commissioner or
County Commissioner

Date Signature of Applicant

_____\$ 5.00 Renewal

Make check payable to: Idaho State Fire Marshal

THIS APPLICATION IS NOT TO BE USED FOR A NEW CERTIFICATION

State Fire Marshal Date

Certification Period: **2/1/2006 to 2/1/2007**